PART B - FEE(S) TRANSMITTAL

Complete and send this form, together $\frac{i}{k}$

Applicable fee(s), to: Mail Mail Stop ISSU EE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
(571)-273-2885

appropriate. All further indicated unless correct maintenance fee notificated to the contract of the contract	s form should be used to correspondence including the delow or directed of the delow.	for transmitting the ISSI ng the Patent, advance of herwise in Block I, by (UE FEE and PUBLICATE orders and notification of r a) specifying a new corres	ON FEE (if requirements feet of the control of the	iired), B will be t ; and/or	locks I through 5 sl mailed to the current (b) indicating a sepa	nould be completed where correspondence address as rate "FEE ADDRESS" for
CURRENT CORRESPOND	DENCE ADDRESS (Note: Use B	lock I for any change of address)	:	······································			
52473 RATNERPRE P.O. BOX 980 VALLEY FORG	STIA	5/2009					
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	<u> </u>	ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/565,768 01/24/2006 Masaya Tamura MAT-8806US 2985 TITLE OF INVENTION: ANTENNA SWITCH MODULE							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	AID ISSUE FEE TOTAL FEE(S) DUI		DATE DUE
nonprovisional	NO	\$1510	\$300	^{\$0} \$1		\$1825.00	05/06/2009
EXAMINER		ART UNIT	CLASS-SUBCLASS	,		,	
STEVENS, GERALD D 1. Change of correspondence address or indication		2817	333-103000				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. Change of correspondence Address form PTO/SB/122) attached. (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Panasonic Corporation Osaka, JP							
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government of Fee(s) are submitted: 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Payment by credit card. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit and overpayment, to Deposit Account Number 18-0350.							hown above)
NOTE: The Issue Fee and interest as shown by the r	s SMALL ENTITY statu	s. Sec 37 CFR 1.27.	b. Applicant is no long from anyone other than the Office.	e applicant; a regi	stered at	torney or agent; or the	R 1.27(g)(2) e assignee or other party in
Authorized Signature Typed or printed name		ce E. Ashery	<u> </u>	Registration N	lo. 34	h 20, 2009	
submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	I application form to the ons for reducing this bur irginia 22313-1450. DO 13-1450.	USPTO Time will vary den, should be sent to the NOT SEND FRES OR (on is required to obtain or re 1.14. This collection is estit depending upon the indivite chief Information Officer COMPLETED FORMS TO spond to a collection of information.	dual case. Any co r, U.S. Patent and THIS ADDRESS	mments Tradema S. SEND	on the amount of time of the amount of time of the time. U.S. Depart of Commissioner for the	gathering, preparing, and e you require to complete timent of Commerce, P () or Patents, P,O Box 1450.

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.